CITY OF TEMPE PARKS & RECREATION ADULT SPORTS TEAM SPONSORSHIP APPLICATION

SPORT			
SEASON:FALLWI		SPRING_	SUMMER
SPONSORING BUSINESS			
ADDRESS			
CITY	 	ZIF)
NUMBER OF EMPLOYEES			
BUSINESS PHONE			
BUSINESS CONTACT PERSON			
TITLE OF CONTACT PERSON			
IF THE BUSINESS NAME DOES OF THE BUSINESS PLEASE DO S			
THE ABOVE BUSINESS HAS AGE TO THE FOLLOWING EXTENT: _ FEE OR EXPLAIN OTHER ARRANG	100	% OF THE LEA	AGUE ENTRY
BUSINESS CONTACT SIGNATUR	RE		
TEAM NAME			
1 P 4 M M 4 A A N 4 4 4 4 4 4 4 4 4			